Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENTAP	PLICATION F Substitute	for Form P)N R	ECORD		Applica	tion or Docket Nu	mber 30
CLAIM	S AS FILED - I (Column 1)		Column 2)		SMALL E	ENTITY	OR		R THAN ENTITY
. FOR NUMBER FILED		NUME	NUMBER EXTRA		RATE	FEE		BATE	
BASIC FEE (37 CFR 1.16(a))	,	•				s	ΔB	RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	1.			· · · · · · · · · · · · · · · · · · ·		OR	x \$ =	S
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	1.		-	s =		OR		
MULTIPLE DEPENDENT CLAIM PI	RESENT (37 C	FR 1.16(d))		-	· s =		OR OR		
* If the difference in column 1 is le	ss than zero, enter	"0" in column	2.		TOTAL		OR	+\$= TOTAL	
	AMENDED - I							TOTAL	
05.21.02 · (Column	1)	(Column 2)	(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	
W CLAIM REMAINI AFTER AMENDM Total (37 CFR 1.16(b)) 7 Independent (37 CFR 1.16(b)) 2	NG P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))	Minus **	20	=	×	s &		OR .	X\$ =/	
Z Independent (37 CFR 1.16(b))	Minus **	4	=	×	\$	7	OR	x \$ =)
FIRST PRESENTATION OF MU	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						OR	+5 =	
					OTAL DD'L FEE		OR	TOTAL ADD'L FEE	
11.26.02 (Column)	(Column 2)	(Column 3)				•	VODELEE [
Total (37 CFR 1.16(b)) WE SEPERATE TO THE CONTROL OF T	IG PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		. RATE	ADDI- TIONAL EEE
Total (37 CFR 1.16(c))	Minus **	20	=	х	s_=	7-7	OR	x \$_=	
Independent (37 CFR 1.16(b))	Minus ***	4	E	x	3 =		OR	**	
FIRST PRESENTATION OF MU	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						OR	+ s =	
o					OTAL OD'L FEE		OR	TOTAL ADD'L FEE	
6-22-65 (Column 1		(Column 2)	(Column 3)					_	
CLAIMS REMAININ AFTER AMENDME	G 1 PR NT F	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(c))	Minus **	20	=	x :	sA	-	OR T	× s	
Total G7 CFR 1.16(c)) Independent (G7 CFR 1.16(b)) REST PRESENTATION OF MAIN	Minus ***	4	=	x	;//=/		OR	×8 =	
THOU THE SENTATION OF MUL	+ 5		$\nearrow \lnot$	OR	+ s =				
42,47				AD	TAL D'L FEE		OR L	TOTAL ADD'L FEE	
* If the entry in column 1 is les ** If the "Highest Number Previo" *** If the "Highest Number Previo" The "Highest Number Previous	ously Paid For" IN T ously Paid For" IN T	'HIS SPACE I	s less than 20, e	nter "2('er "3"	D".	l		-	
The "Highest Number Previou his collection of information is requ	ired by 37 CER 1	or independe	ent) is the highes	t numb	er found in th	e appropriate	box in col	umn 1.	

USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

	Application or Docket Number									
PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998 09/273230										
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMAI	E [/ my	OR	OTHER SMALL		
FOR	NUMBER FI	LED	NUMBER E	XTRA	RATI	E F	EE		RATE	FEE
BASIC FEE						38	30.00	OR		760.00
TOTAL CLAIMS	minus 20= *					=		OR	X\$18=	
NDEPENDENT CLAIMS	DEPENDENT CLAIMS # minus 3 = * /							OR	X78=	78
MULTIPLE DEPENDENT CLAIM PRESENT								OR	+260=	
If the difference in column 1 is less than zero, enter "0" in column 2								OR	TOTAL	838
									OTHER	
03.18.99 (Column 1) (Column 2) (Column 3)						LL EN	пту	OR	SMALL (
∢ RE	LAIMS MAINING VFTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	E TK	DDI- ONAL EE		RATE	ADDI- TIONAL FEE:
AME Total	Minu	# Et	• 20	-	X\$ 9	= -2	- * -	ΘŔ	X\$18=	
Independent *	A Minu		···· 4 _	8	X39	= //		OR	X78=	1
FIRST PHESENTAL		PLE DEPE	NDENT CLAIM		+130	_		OR	+260=	
37 , 42, 47, 50						TAL	/	ΛP.	TOTAL	
08.29.00 (c		•	40-1	(0-1: 0)	ADDIT. F	EE			ADDIT. FEE	
	Diumn 1) Claims		(Column 2) HIGHEST	(Column 3)		Α	DDI-	1		ADDI-
L 	MAINING AFTER ENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	E TI	ONAL EE		RATE	TIONAL
Total +	8 Min	us 1	<u>20</u>	-	X\$ 9	<u>-</u>	7	OR	X\$18=/	
Independent *	<u> A</u> Min		*** 4	-	X39			OR	X78=	[منخر]
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR ⁽	+260=	
1-17					TO ADDIT.	TAL		00	TOTAL ADDIT. FEE	
03.05.01 10	olumn 1)		(Column 2)	(Column 3)				_		
U RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	E TK	DDI- ONAL EEE		RATE	ADDI- TIONAL FEE
Total +	S Min	us i	20	-	X\$ 9			OR	X\$18=/	
Independent •	2 Min	us	nen 1	=	X39		7		X78=	7
FIRST PRESENTAT	ION OF MULTIF	PLE DEPE	NDENT CLAIM	- 1	1-6	[/-	OR		
		anda satur	O	luma 2	+130			OR	+260=	
* If the entry in column 1 is ** If the "Highest Number I	Previously Paid Fo	or in this s	SPACE is less the	ın 20, enter "20."	ADDIT. F	TAL EE		OR	TOTAL ADDIT. FEE	L
***If the "Highest Number The "Highest Number P	rreviously Paid Fo reviously Paid For	or in inis: *(Total or in	dependent) is the	nis, enter s. highest number f	ound in th	e approp	riate bo	x in co	iumn 1.	